WISCONSIN COVERSNET ACCESS AGREEMENT

Wisconsin Department of Transportation MV2940 2005 Ch. 341 Wis. Stats.

Business Access for International Fuel Tax Ag International Registration Both IFTA and IRP		Wisconsin Web Access Management System User Identification Number DO NOT GIVE YOUR PASSWORD		
3. Applicant Legal Name(s)				
4. Trade/DBA Name (If different from legal name)			Area Code – Telephone No.	
5. Security Officer Name, Telephone Number and E-mail Address				
6. Business E-mail Address				
7. Federal Employer Identification No. (FEIN)	ation No. 8. Social Security No. 9. Wisconsin II (Only if no FEIN)		P Account No.	10. US DOT No.
11. Permitting Service or other service provider that has Power of Attorney to represent your business Name				
Address				
Telephone				
E-mail				
This agreement is entered into between the Wisconsin Department of Transportation, Motor Carrier Services Section (The Department) and the licensee indicated above. The Department has implemented a process by which the licensee will conduct its business electronically in substitution for conventional, paper-based documents and to assure that such reports are legally valid and enforceable. In order to achieve this, the parties agree as follows:				
The licensee agrees to comply with reporting, payment, record keeping and display requirements specified by The Department for the International Fuel Tax Agreement (IFTA) and International Registration Plan (IRP).				
The licensee's user identification number and password function as the electronic signature. The licensee is responsible for keeping that information secure. The licensee is responsible for all work or transactions entered using their identification number and password.				
Authorized employees, third party service providers or other representatives are granted electronic access to your business account only upon your authorization or the authorization by your security officer. It is the licensee or the security officer's responsibility to notify The Department if a security change or addition is needed. Access will be withdrawn when the licensee or the security officer notifies The Department. The Department will implement security changes as quickly as possible but will need advance notice of at least 5 business days.				
Each party shall use security procedures that are reasonably sufficient and use its best efforts to ensure that all transmissions are authorized and protected from improper access.				
The licensee, at its own expense, shall provide and maintain the equipment, and software for participation for electronic access. The licensee acknowledges that The Department is not responsible for electronic outages and that it is the licensee's responsibility to file and pay their IFTA tax return by the required due dates.				
Send the completed agreement to: WDOT Motor Carrier Services IRP Unit, P O Box 7955, Madison, WI 53707-7955.				
X (Applicant Signature)				
(Applicant Title)				

(Date)

FUEL TAX LICENSE APPLICATION INSTRUCTIONS

1. Business Access

Indicate if you would like to conduct your business electronically for International Fuel Tax Agreement (IFTA), International Registration Plan (IRP) or both.

2. Wisconsin Web Access Management System User Identification Number

We need the user identification issued to you or your business from the State of Wisconsin site "ON.WISCONSIN.GOV".

DO NOT GIVE US YOUR PASSWORD. After you complete the registration form, you will receive an e-mail confirmation notice, confirming your ID and password. The registration process must be completed within 4 days or you will have to start the registration process all over again (re-register).

3. Applicant Legal Name(s)

The name used on your Income Tax Return and the name(s) used when you applied for your Federal Employer Identification Number or your Social Security Number.

4. Trade/DBA Name (Doing Business As)

The business name under which you operate. Complete only if different from legal name.

5. Security Officer Name

The name of the authorized businessperson who serves as the contact for security additions, changes or deletions for your business. This must be complete so we know who at your company is authorized to make security changes. Give the security officer's telephone number and e-mail.

6. Business E-mail Address

Please provide us with an e-mail address so we can contact you if issues arise in establishing your access.

7. Federal Employer Identification No. (FEIN)

Also referred to as the taxpayer identification number and it is issued by the IRS.

8. Social Security No.

Complete only if you are a sole proprietor with no employees and you are not required by the IRP to hold a FEIN.

9. Wisconsin IRP Account No.

List the International Registration Plan (IRP) account number issued by Wisconsin.

10. **US DOT No.**

A number assigned by the United States government to all commercial carriers (private or for fire carriers) who operate interstate vehicles over 10,000 pounds.

11. Permitting Service Information

Indicate all the information about your permitting service. Include a power of attorney that shows the permitting service or agent has your authorization to represent you or your business. You must notify our office if the power of attorney becomes withdrawn or they service provide will continue to have access to your account and all of your information.

Send the complete agreement to

Wisconsin Department of Transportation Motor Carrier Services Section, IRP Unit PO Box 7955 Madison, WI 53707-7955

If you have any questions please call 608-266-9900 or see the Department's web site http://www.dot.wisconsin.gov